REST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09898497

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS							_	RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		_	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			33 minus 20= *			3		X\$ 9=	117	OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 = *					X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					OTAL .	472	OR	TOTAL	
	С	LAIMS AS A	MENDED - PART II								OTHER	THAN
(Column 1)				(Colu		(Column 3)		MALL E	ENTITY	OR .	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE /	/	RATE	ADDI- TIONAL FEE
	Total	. 33	Minus	** 1	23	= /		X\$ 9=		OR	X\$18=	
	Independent	* 3	Minus	***	T CLAIM	= /		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-135=		OR	+270=	
ADI								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	70	DI1.1 CC		• .	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	(RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	,	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		-		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JUIPLE DEP	ENDEN	CLAIM		-	-135=		OR	+270=	
								· TOTAL DIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)_	(Column 3)		DI1. FEL •		•	ADDI1.1 EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Totai	*	Minus	**		=	,	X\$ 9=		OR	X\$18=	
	Independent	NTATION OF M	Minus	***	T CLAIM	=	;	X40=		OR	X80=	
<u> </u>	rinoi FRESE	INTATION OF M	OLITICE DEF	LINDEIN	OLAIM			-135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE											TOTAL ADDIT. FEE	
		mber Previously Pa nber Previously Pa					r found	in the app	ropriate box	in col	lumn 1.	